

Displaced Voter Affidavit

I _____ hereby certify that I am a
(NAME OF REGISTERED VOTER)

registered voter of the Parish of _____, that
(PARISH OF REGISTRATION)

I am temporarily displaced from my parish of residence by reason of the state of

emergency declared in response to hurricanes Katrina and Rita, that I am eligible

to vote in my parish of residence, and that I expect to be out of my parish of

registration during early voting and on Election Day.

(Printed name of registered voter)

(Signature or mark of registered voter)

(Date of Signature)

For Office Use Only: W/D/P _____ Date Rec'd _____
SOS 3/20/06